

St. Francis Borgia Parish

NEW PARISHIONER REGISTRATION FORM

Family Name _____ Date _____
 Street Address _____ City _____ State _____ Zip _____
 Phone: (Home) _____ Unlisted? Yes / No Name and phone number listed in Resource Book: Yes / No
 Cell Number _____ Cell Number _____
 Email: _____ Email: _____
 Previous Parish _____

	Member 1	Member 2	Member 3	Member 4	Member 5
Last Name					
First Name					
Middle Name					
Maiden Name					
Birth Date					
Marital Status					
Employer					
Occupation					
Religion					
Baptized (Y/N)					
First Communion (Y/N)					
Confirmed (Y/N)					
Attend Church (Y/N)					
Special Needs					
Interest in Parish Ministries					
Children Only School Name Grade Level Attend PSR (Y/N)					

If married: Date _____ By a Priest: Yes / No Church Married at _____

If not married in the church, by whom _____

If you were not married by a priest, would you like a priest to call and discuss this with you? Yes / No _____

General Comments:

Please Return To: Parish Secretary, St. Francis Borgia Parish, 115 Cedar Street, Washington, MO 63090

For Office Use: _____ Pastor · _____ Servant Keeper · # _____ · _____ New Parishioner Packet Recv'd/Mailed · _____ New Parishioner's Bio in Bulletin